

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 5		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST MR. <i>Randy</i>	MI L.	OFFICE USE ONLY		
	NICKNAME	LAST <i>Boyd</i>	SUFFIX	Date Received 4-26-19		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX	APT / SUITE #:	CITY: <i>Port Lavaca</i>	STATE: <i>TX</i> ZIP CODE <i>77979</i>		
<input type="checkbox"/> Change of Address						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (341)	PHONE NUMBER 920-6568	EXTENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <i>Debbie</i>	MI	Receipt #		
	NICKNAME	LAST <i>Boyd</i>	SUFFIX	Date Processed		
					Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE <i>346 Bay Meadow Port Lavaca Tx. 77979</i>					
8 CAMPAIGN TREASURER PHONE	AREA CODE (341)	PHONE NUMBER 552-6569	EXTENSION			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)					
10 PERIOD COVERED	Month <i>4</i>	Day <i>4</i>	Year <i>2019</i>	Month <i>4</i>	Day <i>26</i>	Year <i>2019</i>
11 ELECTION	ELECTION DATE Month <i>5</i> Day <i>4</i> Year <i>2019</i>	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special				
12 OFFICE	OFFICE HELD (if any) <i>CALHOUN PORT AUTHORITY DISTRICT 4</i>	13 OFFICE SOUGHT (if known) <i>CALHOUN PORT AUTHORITY DISTRICT 4</i>				
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Randy Boyd

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0.00

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 2,267 ⁷⁰/₄₄

4. TOTAL POLITICAL EXPENDITURES

\$ 2,267 ⁷⁰/₄₄

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

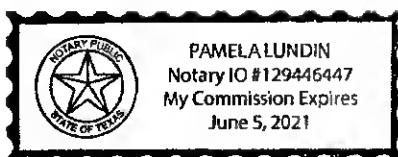
\$ 0.00

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0.00

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



PAMELA LUNDIN
Notary ID #129446447
My Commission Expires
June 5, 2021

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Randy L. Boyd, this the 26th day of April, 2019, to certify which, witness my hand and seal of office.

Pamela Lundin

Signature of officer administering oath

Pamela Lundin

Printed name of officer administering oath

Notary Public

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)	
Randy Boyd		
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$	
5. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 2,267 ⁷⁰ ₀₀	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME: RANDY BOYD	3 Filer ID (Ethics Commission Filers)	
4 Date: 4/8/19	5 Payee name: PORT LAVACA WAVE		
6 Amount (\$): \$ 646.45	7 Payee address; City; State; Zip Code: 107 E. AUSTIN PORT LAVACA, TX 77479		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 4/15/19	Payee name PORT LAVACA WAVE		
Amount (\$) \$ 683.86	Payee address; City; State; Zip Code 107 E AUSTIN PORT LAVACA, TX. 77479		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 4/22/19	Payee name PORT LAVACA WAVE		
Amount (\$) \$ 886.45	Payee address; City; State; Zip Code 107 E AUSTIN PORT LAVACA, TX 77479		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

THE PORT LAVACA WAVE
107 E. Austin • P.O. Box 88
Port Lavaca, Texas 77979-0088
(361) 552-9788

THE PORT LAVACA WAVE
107 E. Austin • P.O. Box 88
Port Lavaca, Texas 77979-0088
(361) 552-9788

Customer's Order No.

Date

4-8-19

Sold to

Handy Boyd
Political

Address

Sold By	Cash	C.O.D.	Charge	On Acct.	Mds. Ret'd.	Paid Out
						90445 -1800

credit

All claims and returned goods MUST be accompanied by this bill.

Rec'd.
By

MN

88645

Item# GP62

Thank You!

Customer's Order No.

Date

4-8-19

Sold to

Handy Boyd
Political

Address

Sold By	Cash	C.O.D.	Charge	On Acct.	Mds. Ret'd.	Paid Out
						69695

All claims and returned goods MUST be accompanied by this bill.

Rec'd.
By

BN

Item# GP82

Thank You!

THE PORT LAVACA WAVE

107 E. Austin • P.O. Box 88
Port Lavaca, Texas 77979-0088
(361) 552-9788

Customer's Order No.

Date

4-15-19

Political of Boyd

Sold to
Address

Sold By	Cash	C.O.D.	Charge	On Acct.	Mds. Ret'd.	Paid Out
						68380

68380

Item# GP62

Thank You!

MH

All claims and returned goods MUST be accompanied by this bill.

Rec'd.
By

3.05